

RESIZE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | NO.  | DATE     |
|---------------------------|----------|------|----------|
| FEE DETERMINATION         | mesay    |      | 08-22-01 |
| O.I.P.E. CLASSIFIER       |          | 21   | 8/30/01  |
| FORMALITY REVIEW          | RL       | 1050 | 9/21/01  |
| RESPONSE FORMALITY REVIEW |          |      |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
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| Final    |          |
| Original |          |
| 1        | 3/1/02   |
| 2        | 11/06/02 |
| 3        | 12/18/02 |
| 4        | 5/30/03  |
| 5        | 7/10/03  |
| 6        | 10/18/03 |
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| Claim    | Date |
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| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

Jm / 854  
9/21/01